

# Jefferson County

## Child Support Agency

Courthouse Rm 219  
320 S Main St  
Jefferson WI 53549  
[www.jeffersoncountywi.gov/child](http://www.jeffersoncountywi.gov/child)

TEL: 414/615-2587  
FAX: 920/674-7435  
TDD: 800/947-3529  
email: [childsupport@jeffersoncountywi.gov](mailto:childsupport@jeffersoncountywi.gov)

Dear Participant:

Your child support case in Jefferson County is a NON IV-D case which means that your case is not currently receiving case management services from the Child Support Agency. Your case is not receiving case management services because neither parent has filed an application for IV-D services with the Child Support Agency and the Human Services division has not referred a public assistance case for your child(ren).

**Effective April 27, 2010, the following fees will be charged for the services listed below in NON IV-D cases.**

Process Income Withholding Orders .....	\$35.00 per request
To Perform an Account Reconciliation (Affidavit or Certification) ...	\$35.00 per year
Reconciliation of a Percentage Expressed Obligation .....	\$35.00 per year (By court order with Income provided)

**TO AVOID THESE FEES,** you may apply for case management services (also known as IV-D services). You can open an IV-D case with the Jefferson County Child Support Agency by signing and returning the enclosed application for IV-D services. (There is not a fee to apply for IV-D services) As part of the process to become an IV-D file, the Child Support Agency will convert any percentage expressed orders to a fixed-sum to ensure that federal and state requirements are met. In addition, IV-D cases may be eligible for enforcement services such as tax intercept, lien docket, contempt, etc. if the required thresholds are met.

**OR, IF YOU DECIDE NOT TO APPLY FOR CHILD SUPPORT SERVICES,** any request for the above listed activities will not be performed until the fee has been received from **one** of the case parties. Payment can be made by money order, certified bank check, or by cash. Payments must be payable to **Jefferson County Child Support Agency (PERSONAL CHECKS WILL NOT BE ACCEPTED)**. Please direct your questions to (414) 615-2587.

JEFFERSON COUNTY CHILD SUPPORT AGENCY  
Stacey Schuck, Director

Enclosure: (Application)  
Cc: Other Participant

Detach and return with your payment

Name: \_\_\_\_\_  
(Please Print)

Court Case Number: \_\_\_\_\_ (and/or) Pin Number \_\_\_\_\_

Last 4 digits of your SSN: XXX-XX-\_\_\_\_\_

Amount Enclosed: \$ \_\_\_\_\_ **(PERSONAL CHECKS WILL NOT BE ACCEPTED)**

**Please mail your payment and coupon to:**

Jefferson County Child Support Agency  
320 S Main St. Room 219  
Jefferson, WI 53549

NIVD Fee